

**WILDWOOD CANYON STATE PARK**  
**12241 CANYON DRIVE**  
**YUCAIPA, CA 92399**

Email: [Joseph.Esparza@parks.ca.gov](mailto:Joseph.Esparza@parks.ca.gov)

Phone: 951-940-5657 (Museum)

Alternate Phone: 951-940-5600

Fax: 951-657-0077



## **ON-SITE SCHOOL PROGRAM INFORMATION**

With prior arrangements, all on-site school programs are **FREE!**

Wildwood Canyon State Park on-site school presentations are typically 30-45 minutes of interactive programming per class. Programs are available on Thursdays and Fridays from 8:30 a.m. until 2:00 p.m.

One on-site visit can include multiple presentations for several classrooms.

In order to maximize the hands-on activities, we ask that you have teachers and chaperones available to provide a ratio of 1 adult to 10 children.

**Program Description:** In collaboration with the Lake Perris Regional Indian Museum on-site school presentations provide a comprehensive interpretation of California Indian history and culture throughout the desert region. In addition, we offer programs that provide enrichment in Earth, Life, and Physical Sciences.

Please call for reservations and email or fax the attached form at least 4 weeks prior to your requested on-site visit. If you have any questions or special accommodations, please contact the museum at the number listed above or email [Joseph.Esparza@parks.ca.gov](mailto:Joseph.Esparza@parks.ca.gov)

California State Parks does not discriminate against individuals with disabilities. Prior to the on-site visit, participants with disabilities who need assistance should contact our office at the number listed above.

**Important:** You are not confirmed for an on-site presentation until you receive an On-Site Presentation Request signed by a park official.

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**ON-SITE PRESENTATION REQUEST**

This form must be submitted to the park you are requesting for an on-site visit. When endorsed by park staff, it will be returned to you and will serve as your record of the reservation. Please fill it out completely.

Park Unit: **Wildwood Canyon State Park**

Proposed Date of Visit:  Alternate Date:

Time of Visit:  Alternate Time:

Name of School or Group:

Address:

Grade:  No. of Classes:  No. of Children (Maximum 120):

Number of Adults (1 adult to 10 children):

Person in Charge (contact individual):

Email:  Phone:

\*Special Needs Request:

Reservations must be made **3 weeks** in advance of the proposed date of your on-site visit to allow preparation and scheduling by park personnel. The school principal must sign this form. Groups shall be accompanied by enough school appointed adult chaperones or teachers to maintain harmony, and their chaperones or teachers shall accompany the students during the visit.

SIGNED: \_\_\_\_\_

Principal of School or School Administrator

**Park Use Only**

☐ We are pleased to confirm your visit for \_\_\_\_\_

☐ We regret that the time you requested for a group visit is not available.

**Park Official:** \_\_\_\_\_ **Date:** \_\_\_\_\_

☐ Email with confirmation \_\_\_\_\_

☐ Email for Feedback \_\_\_\_\_ ☐ Email Pass \_\_\_\_\_ Program Staff: \_\_\_\_\_